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VACCINATION AND SMALLPOX IN SIAM.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—The vaccine virus which you were very kind to send under date of July 3d, 1837, was not received until some time in May, 1838. Of course the long interval from the time it was taken to the time it arrived, rendered it little better than hopeless to attempt to produce the vaccine disease with it. However, I determined to spare no pains or experiments in trying to introduce the great boon into this country, and therefore called together some dozen or more children, and inserted the matter in their arms, in various ways. I think I repeated the experiment but it was all in vain. Since then I have made experiments with other parcels of vaccine virus, sent from Canton and Singapore, which likewise failed. Dr. Parker, of Canton, sent me a parcel of the virus last January, which is the cool season here. From the time of taking it till I began to experiment upon it, was only about six weeks. It being so recent, the season being cool, and the matter being prepared for the voyage in various ways, and with great care, I could not but entertain sanguine hopes that I might be allowed to effect the complete introduction of the kinepox into Siam. The matter was sent in the form of a scab, in a sealed phial, immersed in water—on plates of glass protected from the air and light by means of bees-wax, and on very fine linen, which was thoroughly charged with it—sealed up in a small phial, and this immersed in a larger phial of water. At Dr. Parker's suggestion, Dr. Tracy and myself cut off small pieces of this linen, and inserted it deeply within the texture of the true skin. The puncture was so free, that the blood escaped to the amount of several drops; when it had ceased to ooze out, the wound was wiped nearly dry, and the linen crowded in with the point of a quill tooth-pick. Some we vaccinated by a slight puncture between the cuticle and true skin, and some we scarified. In these different modes we vaccinated several different companies of children, at different times. Three, and only three, of those in whom we inserted the linen, had sores. These looked somewhat like the vaccine sore. Although there were many spurious appearances about them, we judged it wise to take the matter and try its effects upon other individuals. Many were thus vaccinated, and nearly all had sores in consequence; but they all arose as soon as the 2d day, and were perfectly suppurated as soon as the 3d day. The sores were far more like little festers than like the vaccine pustule. At length I inoculated some half dozen or more whose sores had appeared the best, and they all took the smallpox. So the work was ended.

It is impossible to determine why it is that Siam so successfully resists the blessings of vaccina. If the virus which Dr. Parker last sent me was genuine (and he is confident that it was), I cannot imagine why it failed of producing the true pustule in Bangkok. I can hardly hope ever to obtain any from abroad that shall be more fresh than that. I should have said that the scab and the matter on the plates of glass did not in one instance produce a sore, and some 40 or 50 persons had it inserted in their arms. I am informed by Dr. Richardson, of Maulmein, who is now in Bangkok on an embassy, that vaccina was introduced into Burmah with very great difficulty, and that as yet it has been found impossible to preserve it good for more than two or three months, when it loses entirely its prophylactic powers, and produces much confusion and much loss of confidence in the true vaccine virus. The same is true at Pinamy, Malacca and Singapore. It has been introduced at all these places; but very little dependence can be placed upon it. These facts open a field for medical philanthropists to investigate. Had I time I should engage in it with all my heart. I am not willing yet to indulge the despairing thought that the many millions of human beings inhabiting Southeastern Asia can never enjoy in full the blessing of vaccination. I believe the present barrier to it may be discovered and removed by human agency. I would earnestly invite the attention of the medical faculty in my beloved America to this deeply interesting subject.

Although my letter is already long, I cannot forbear to inform you of the introduction of inoculation with the smallpox in Siam within the last five months. The smallpox made its appearance in the neighborhood of the Baptist Mission in this place about the first of November, 1838. It annually appears more abundantly during the months of November, December, January, February and March. It came so near to the families of my brethren that it was judged prudent to inoculate all their children and households, which Mr. Jones did with perfect success. Soon after the smallpox appeared in the neighborhood of the A. B. C. F. Missions in Bangkok, which induced us to look to God for special direction and aid. The result was, a full conviction that it was our duty to inoculate our children; for none of them had been vaccinated to any purpose, except one who was vaccinated in Singapore. Accordingly I inoculated them all, and several Siamese inmates of our families. All, excepting one or two Siamese, took it, and passed through the different periods of the disease with very little sickness. The Prakklang, the Minister of Foreign Affairs, heard of the result, and sent to me to learn more definitely about the science of inoculation. We answered all his inquiries. Soon the tidings of our successful inoculation reached the king's ear. He despatched to me several of his first physicians to investigate the subject. I taught them with much pleasure. Quickly his Majesty ordered several of his personal physicians to seek a number of boys who had not had the smallpox, and bring them to me for inoculation, that he might have an ocular demonstration of what he had heard. The physicians were obedient to the command, and came to me many times, bringing different companies of lads, all of whom I inoculated, with the most desirable success. Just about this time, I wrote a short treatise on vaccination and inoculation, expressly for the king, and presented it to him through the Prakklang. Not many days after this, on the 4th of January, the Prakklang sent for me to visit him, when at his earnest request I inoculated 6 of his small children, 3 grand-children, and 3 concubines. Thus did this high officer evince unshaken confidence in this plan, and was heartily willing that the smallpox (than which no disease is more terrible among the Siamese) should be inserted into 12 persons in his own family, no less dear to him than the families of American parents. What American parent would have exhibited more real greatness under similar circumstances? He had seen the result of inoculation in a few, and had read my treatise, and was thus prepared to seek refuge in inoculation from the scourge that threatened his family. On the 9th day of the same month, the Prakklang requested me to inoculate some 15 or 20 other little ones in his house. On the following day, his brother Pysipipat summoned me to inoculate in his family. About this time our mission published a treatise on vaccination and inoculation, designed especially for the physicians of Siam. The work was speedily in great demand. The king took measures to send copies of it into several distant provinces of his kingdom, and had an appendix written for it by his brother, whose title is Father of Doctors. The object of this appendix was to specify particularly what medicines of this country might be employed in difficult cases of the inoculated smallpox. It pleased the Lord to grant me perfect success in the families of the Prakklang and his brother. Almost every person inoculated took the disease, and had it with remarkable ease; and yet with sufficient of the symptoms of the smallpox to leave no room to doubt that it was genuine. After this I was summoned to inoculate in the families of the princes, nobles, rulers and people, almost daily for weeks. The king's physicians came to me often to perfect their skill in the art. They were fond of addressing me as their preceptor. They strongly urged me to prepare other medical works, particularly on midwifery. In the month of January there were about 1500 persons inoculated by the royal physicians, besides thousands, probably, by the people's physicians, and only one death was known to have occurred from among them all. Very few indeed had more than a hundred or two hundred pox. The great majority of the cases had less than one hundred pustules. The king himself was not backward in having his own children inoculated. He was delighted with the results of this mode of relief, and was very liberal in his praises of the American doctors, who had introduced the great blessing into his dominions. This was for many weeks the all-engrossing topic of conversation. It was said by many good judges that this means alone would save annually hundreds of lives in Bangkok, and that if inoculation should be continued a few years this country would overflow with inhabitants. It is said that his Majesty had his physicians inoculate without money and without price, to follow our example. Indeed he gave money to the poor who were not able to purchase medicines, and paid most liberally for good smallpox virus, that he might encourage parents to puncture the pustules of their fearful children, and thus remove one obstacle to inoculation among this puerile people. The king and people's physicians continued to inoculate during the month of February. Among the thousands inoculated that month, there were a few deaths. The weather had become hotter; the cool season was ending; and it is probable that the physicians ventured to allow their patients to eat with little fear. As the months of March, April and May would be dry and hot, I advised that inoculation should be suspended until another cool season. The physicians have very generally complied with this advice.

I cannot but consider the success of this effort in inoculation as very remarkable. Dr. Richardson, who was long the civil physician and surgeon of the English settlement at Maulmein, in Burmah, but is now the English Ambassador to Bangkok, informs me that inoculation is almost their only relief in smallpox in Burmah, but that it is always attended with great danger and much loss of life. I know not to what natural causes to attribute our wonderful success. One thing is evident, and ought ever to be gratefully acknowledged, viz., that the special blessing of God has been most signally stamped upon it. Here is another subject for the study of the medical faculty. Let them pry into it with much enthusiasm. I will endeavor to stand ready to answer any questions they may see fit to propound to me. I shall be happy to contribute my mite to promote a profession which I must ever greatly respect.

I remain, dear Sir, yours truly,

Bangkok (Siam), March 12, 1839. D. B. Bradley.

THE POPULAR STUDY OF ANATOMY AND PHYSIOLOGY.

To the Editor of the Boston Medical and Surgical Journal.

Dear Sir,—The address from which the following extracts are taken was delivered by a young physician of this State, to a crowded audience; and although there may be nothing new here to the professional reader, it will, perhaps, be some gratification to a portion of your readers to know that our backwoodsmen take no little interest in anatomy and physiology.

———, *Illinois, Aug. 25th*, 1839.

Extracts from an unpublished Address on the Popular Study of Anatomy and Physiology, by a Physician of Illinois.

I come now to the period to which I have alluded in a former part of this address—a period when an electric shock appears to have been given to science in its widest domain; the reign of the Newtonian philosophy.

The influence exerted upon physiological science by the labors of Sir Isaac Newton was of a two-fold character. 1. He placed physics in their proper place. 2. He showed, by a process of reasoning, similar to the Baconian philosophy, the true nature of cause and effect applied to the phenomena of the material universe. Thus he exhibited, in an indirect manner, the true spirit of physiology, showed wherein it harmonized with physical science, and within what limits each should be confined. The universe was the field for his mighty genius, and the economy thereof he closely studied. By his investigations of the laws governing inorganic bodies, he pointed out to the scientific world that inanimate matter was controlled by an economy entirely distinct from that possessed by bodies endowed with vitality. Previous to his time physicians were ever laboring to explain the functions of the living body upon principles entirely physical; but now that the relation of physical cause and effect was so clearly elucidated, they began to see their error. From this period they commenced a more profound investigation of the economy of animate creation: they saw that man was an animal of wonderful construction, whose body was governed by a principle passing wonderful; that the phenomena exhibited in every living function were effects too powerful to be brought about by the feeble causes for which their forefathers had contended; and, adopting the logic of the Newtonian school, they proceeded link by link in the great chain of cause and effect, until, at the present day, physiology takes its rank among the certain sciences.

But although physics should be studied as a distinct science, a knowledge of its application to physiology is of the deepest value. A nice relation exists between the two, but the line of demarcation should ever be kept in view.

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Reciprocal influence is a fundamental principle in the economy of the universe, and is most strikingly exhibited in the animal and vegetable kingdoms. Vegetables form a great portion of the food of animals, and their destruction by the latter is one great means of their preservation, for were they allowed to grow without retrenchment, the surfeit which would ensue would render them unfruitful.

Animals are ultimately dependent upon vegetables for their subsistence. It is evident, then, that these materials must, in the course of time, become limited and their use restricted, that they may be replenished and their perpetuity preserved. How is this to be effected? The substance of one animal must be employed for the use of another. "Hence has the ordinance been issued to a large portion of the animal world, that they are to maintain themselves by preying upon other animals, either consuming their substance when already dead, or depriving them of life in order to prolong their own. Such is the command given to the countless hosts of living beings which people the vast expanse of ocean—to the unnumbered tribes of insects which every spot of earth discloses—the great number of the feathered race,"[*] and to man.[†]

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[*] Roget—Bridgewater Treatise.

[†] May we not derive an argument from this provision of nature against the theory that man is a phytivorous animal. Were this theory true, it would seem to me necessary to change, in a considerable degree, the present economy of the animal and vegetable kingdoms. The present destruction of vegetables by phytivorous animals of every species, seems to be exactly sufficient for their growth and nourishment; and were the habits of so large a species as the Bimana (extending, as it does, all over the world) to become so completely changed as to abandon the use of animal and live solely on vegetable diet, consequences would ensue which would unquestionably present a sad disorder of the harmony and uniformity of nature's laws. The vegetable world would suffer a demolition inconsistent with the office assigned it by the Deity—and animals of inferior grade to man, those who are entirely

This brings me to speak of the popular utility of anatomy and physiology.

Strange as it may seem to my audience, it is a truth incontrovertible, that almost every pursuit of the human mind has more or less connection with these branches of natural science. The divine, who assumes the high, arduous and responsible office of directing man in the path which leads to future bliss, should acquaint himself with the laws of the human system and the laws of all organized bodies. The jurist, who defends the rights of man from innovation, and upon whose sound and extensive knowledge often depends the life of a fellow being, cannot discharge the important duties of his station without a knowledge of these same laws. The professional teacher, to whose charge is committed the education of youth—he who may be deemed the guardian of our civil rights—should, without question, possess the same important information.

Communities, who desire health and prosperity, and the establishment of a standard of sound medical acquisition, would find vast advantage in learning the structure and functions of the human body. Finally, a nation which would enjoy entire prosperity should establish means for the dissemination of such valuable knowledge.

Allow me to dwell separately upon these propositions. First, of a knowledge of anatomy and physiology to the divine. It is admitted by every competent mind that nothing is so well calculated to convince the unbelieving mind of the existence and high attributes of the Deity, as a display of his power, wisdom and goodness as exhibited in his works of creation. This department of knowledge has been very aptly styled *natural theology*.

The animal and vegetable kingdoms form, perhaps, the most splendid subjects of reflection to controvert the views of the atheist and the infidel. "Behold the busy theatre of animated existence, where scenes of wonder and enchantment are displayed in endless variety around us; where life in its ever varied forms meets the eye in every region to which our researches can extend; and where every element and every clime is peopled by multitudinous races of sensitive beings, who have received from the bounteous hand of their Creator the gift of their existence and the means of enjoyment."—*Roget*.

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And how vastly important is it that they, whose province it is to teach man the ways of so benevolent a being, should learn the structure of the noblest of his works, the laws which keep this structure in the performance of its functions, and the adaptation to the same of the world and the variety of material objects.

Second: of a knowledge of anatomy and physiology to the jurist. I will add to what I have already said, that no one can be an accomplished lawyer without an acquaintance with these branches. And why? Go, if you please, to our courts of justice and witness a trial for murder. Cast your eye upon one being in the assembly, whose life

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phytivorous in their nature, must be deprived in no little degree of their natural food, both by the increase of their numbers (the natural result of the change in man), and the immoderate destruction of their food by our species.

life hangs, as it were, upon the wisdom of his counsel. Hear the evidence of his guilt, and that of his innocence. Hear the counsel's defence for his client. Does he stand in no need of anatomy? Has he no use whatever of physiology? Does he attempt to impress upon the minds of the jury that the nature of the injuries found upon the body of the deceased were not such as could induce death? Does he show that the location of a single mark of injury is such that no violence could have been done a vital organ? Can he demonstrate, to that collection of twelve plain, common-sense men, the relation which the organs of the body sustain to each other; or can he show that the injury of one will create the disorder of another? Perhaps suspicions have been excited that the deceased has been poisoned. Is the counsel for the accused ignorant of the action of poisons on the human body? Would he know how to superintend an examination to this end after death? Perhaps the criminal in the box is a mother, arraigned in court to answer for the murder of her infant babe. She may be guilty, and deserve the punishment of the law; but she may be as guiltless as an angel—as innocent as her babe. And how is the truth to be known? Doubt must hang over the minds of all, and no one is justified in expressing a decided conviction unless the body of the infant has been rigidly examined. Let us suppose that in all the cases mentioned the accused were innocent. Where would rest their fate with such counsel as I have described? The trial is over—the judge has charged the jury—the jury have retired and returned—their verdict is handed to the court—the tear of sympathy now starts from many an eye—suspense hangs heavy upon many a heart—now it is over, and the piercing, heart-rending outcry of grief is heard as the awful sentence of *Death* is pronounced upon the head of the unoffending. But stay. Let your imagination dwell for a moment longer upon the scene. Behold in that assembly a person of commanding appearance arise and address the court. He gazes with an eye of solicitude upon all around him, and commands a breathless silence. He seems about to make a long and powerful effort in behalf of his fellow being, but his words are few, simple and effective. He shows to the clear conviction of his audience that the prisoner has not been justly dealt with—that the testimony of physicians has been omitted, and that a new trial should be granted as early as possible. His motion is carried without discussion, and the poor criminal has yet a chance for his life.

Time elapses. The temple of justice is again thrown open—the same criminal is arraigned—that man of intellectual mien appears, as his counsel—medical testimony is made full and ample—the jury is addressed in arguments unanswerable—the trial closes—the jury confer —and the verdict returned to the court is read in the hearing of all present—" Not guilty."

Of a Knowledge of these Branches to the Professional Teacher.— * * * * * * * Philosophers have told us much of the entity and immateriality of the mind, but never did mankind entertain just views of this subject until an enlightened physiology declared to them the functions of an organ which attains its highest development in man

—the brain. That the brain and nervous system are the bonds of union between the spiritual and physical, no rational man can doubt; and speculate as we may upon the immaterial character of the mind, it is utterly impossible to conceive of its existence without the existence of the brain; and until we learn the relation which the latter sustains to the whole body, we can never clearly comprehend the fundamental principles of mental science.

Mistake me not for a materialist. I am contending for a doctrine which has its foundation in the constitution of man—a doctrine that must abide so long as nature herself preserves her uniformity; and could I but urge upon the instructer of youth the necessity of studying those branches which would at once convince him of its truth—could I persuade him that by a step of this kind, he would prepare himself infinitely better for imparting instruction, and at the same time for instructing youth in branches calculated to facilitate their studies, and improve the powers of their minds, I should ever feel proud of my effort.

I proceed to consider my third proposition. "Communities who desire health and prosperity, and the establishment of a standard of sound medical acquisition, would find vast advantage in learning the structure and functions of the human body."

As we advance from a natural to a civilized state, and from this to refinement and luxury, disease increases in its varied forms and complex character. The rude Indian of the forest breathes the balmy air of his native abode, partakes of his simple repast, and rarely lays the sickened head to rest. Not so with the man whom education and refinement have placed in the high circles of life. He lives upon the products of a richly cultivated land, feeds at the banquet board, "looks upon the wine when it is red within the cup," conforms to fashion, and would fain cheat nature of her office. But she will not be deceived, and when artful man infringes upon her rights, he suffers the penalty of sickness. Since, then, disease is our natural companion, how vastly important is it to preserve, as far as possible, the health of communities.

The proposition just announced consists of two clauses. The first intimates the value of the possession of means calculated to preserve health and prevent disease; the second, the duty of every good citizen to supplant empiricism. Upon these I shall dwell separately.

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Of Dress.— * * * * * * * I shall close my remarks on dress by a brief allusion to a custom of the young ladies of fashionable life. What object in the walks of social life can elicit greater admiration than the playful, innocent and intelligent girl of thirteen? Free from any restriction which fashion imposes, she enjoys an enviable independence—the delight of all her friends. She goes about in the flower forest and culls a rich bouquet from the native sweets of the earth. In the early spring morn she is out upon the green hills, sporting with the wind, and catching the fragrance of the flower-scented breeze. Time moves along; and the sportive girl becomes the young lady of "just seventeen." In woods and hills and flowers, and the air of heaven, she no longer takes delight, and few, if any, of her former amusements are congenial to her spirits. Where is she to be seen? In the parlor, a *contracted beauty* (?) sitting like a marble statue—or in the ball-room moving in the dance, panting for breath, or swooning away gracefully upon the sofa. Time passes by, and she becomes a female exquisite. The refreshing air of the spring morning is too keen for her delicate nerves; a romp over the hills would prostrate her feeble frame. She slumbers till 10 in the forenoon, sips coffee at 11, and ventures into the parlor at 12. She allows a half hour to a visiter daily, and sends to the rest who would enjoy her company, the unwelcome message, "not at home." A few months pass over her head and she becomes a complete victim of fashion—an old acquaintance of fainting spells—not an entire stranger to periodical headache and bad coughs—and with palpitation of the heart and asthma she is quite familiar. And what is the secret of the whole? Doubtless I am anticipated. Let me, then, ask when shall the use of these instruments of suicide, the corset and stays, be abandoned? Not, I fear, until mothers and daughters learn that the chest contains important organs of life, which have a most intimate connection with every organ of the body, and that they cannot safely endure the compression of hoops and staves; not until they can discern that the injury thus sustained by the brain and nervous system impairs the faculties of a mind which might have been an ornament to our age and country.

ON VARICOCELE, AND ESPECIALLY ON THE RADICAL CURE OF THAT AFFECTION.

BY H. LANDOUZY.

Sixty persons out of every 100 are affected with varicocele. Hence the necessity of studying this disease. The term varicocele, as usually employed, includes the two terms varicocele and circocele, the first of which implies an abnormal enlargement of the veins of the scrotum; the last, of those of the spermatic cord, testicle and epididymis. Varicocele never occurs without circocele, and, in fact, always forms a consequence of it. The term varicocele is employed in preference to that of circocele, and is understood to mean a dilatation of the veins of the scrotum and cord. The age at which it most frequently begins is from 10 to 30. Of 45 cases, 10 of which are reported by others, and 35 occurred in the practice of Landouzy himself, 13 were individuals between 9 and 15 years of age; 29 between 15 and 25; and 3 between 25 and 35.

The anatomical conditions which dispose to the frequent occurrence of varicocele are the depending position and great length of the spermatic veins; the weakness of their parietes; the absence of valves; and, especially, the changes in respect to volume, which they are constantly undergoing. We may add to these, the pressure of a column of blood reaching from the second dorsal vertebra to the testicle, and occasional impediments offered by the inguinal canal. The disease is more frequent on the left than on the right side. It is, indeed, extremely rare on the right side, and almost never occurs only on that side. In 8 out of 17 cases, the veins of the right side were enlarged simultaneously with those of the left, but to a much less degree. It is very rarely necessary to operate on the right side. Out of 120 operations performed by M. Breschet, one only was on the right side. The chief reasons which have been assigned for the greater frequency of varicocele on the left than on the right side, are the following. 1. The right spermatic veins open into the vena cava in a direction parallel to the axis of that vessel, while the left open into the left emulgent vein at right angles to the current of blood which flows through it. 2. The greater length of the left spermatic vein. 3. The pressure of the contents of the sigmoid flexure of the colon. With regard to this last cause, Landouzy observes that only 1 out of 17 patients was affected by constipation. Amongst the occasional causes of varicocele may be mentioned, all those which either prevent the return of blood to the heart, or determine it in large quantity to the organs of generation. These need not be particularized. There seems to be no close connection between varix and varicocele. Of 15 cases of varicocele, 1 only was affected with varices, and of 20 persons who had varicose veins in the lower extremities, no single one had varicocele. The symptoms of this disease are slight at first, and its existence is usually discovered by accident. There is a feeling of weight in the testicle, perineum and loins, and an unusual twitching in the course of the cord; the scrotum is long, pendant and soft, and increases rapidly in volume under the influence of heat or fatigue. The patient carries the hand, at every instant, to the scrotum, in order to give it a more favorable position. If the patient is not subject to much fatigue, if he does not remain for any length of time in the erect posture, and avoids all the exciting causes of the disease, a suspensory bandage will guarantee him against further suffering. But if the disease is allowed to go on unchecked, it becomes a source of constant suffering. A short walk causes extreme fatigue, the breathing becomes hurried, the face is bathed in sweat, and expresses the deepest distress. In some cases it is impossible to assume the erect posture, without the aid of a suspensory bandage. The case of one of the most celebrated dramatic authors of France is mentioned, who had acquired the habit of composing whilst rapidly pacing his chamber. This disease entirely put a stop to his perambulations, and with them to his literary productions. He was restored by an operation performed by M. Breschet. There is one symptom which our author has never known to be absent, but which has been omitted by other writers on this subject. It is an increased perspiration of the skin of the scrotum on the side affected. This secretion is, in some cases, so abundant as to require the use of a fold of linen. The superficial veins may acquire an enormous size. One case is mentioned in which they equalled, and even surpassed, the volume of the crural vein. Some cases are quoted from Pott and Sir A. Cooper, in which the disease seems to have made a sudden attack; in these instances Landouzy thinks that the disease had existed in a less marked form before the acute attack commenced. The atrophy of the testicle, which took place in more than one instance in which varicocele followed an accident, is justly attributed to the accident, and not to the varicocele which was the consequence of it; nevertheless, when the disease is very much advanced, the enlarged veins compress the testicle, and cause the absorption of it. Out of 15 cases, our author found the testicle in a more or less advanced state of atrophy in 9. The occurrence of atrophy of the testicle, as a consequence of varicocele, is established by quotations from Celsus, Callisen and Pott. Sir A. Cooper, however, does not seem to have met with any examples. One case, mentioned by Pott, is the only one in which atrophy of both testicles took place, but Landouzy has often observed the right testicle partially atrophied in varicocele of the left side. The atrophy of the testicle is proportioned to the extent of the varicocele. Not so, however, the pain, which is often most considerable where the veins are least enlarged. This fact is attributed to an enlargement of the small veins surrounding some nervous fibres. It is to the acute pain experienced in some cases, and to the constant uneasiness present in all, that the deep melancholy common to almost all diseases of the urinary and genital organs is to be ascribed. The chief object of Landouzy's paper is to prove the superiority of M. Breschet's method of compression to all others which have been recommended. Thirteen cases are related, in all of which great relief, in the majority a perfect cure, was effected by this means. The danger, too, of inflammation of the veins is much less than when other methods are resorted to; the cure, moreover, is accomplished in a less space of time.

As a preliminary step to the performance of M. Breschet's operation for varicocele, it is necessary that the diseased veins should be considerably distended with blood, in order that none of them may escape the compressing action of the forceps; for this purpose, in summer it will be sufficient that the patient should walk for some time previously, but in winter it will be desirable that he should also take a warm bath. This precaution being taken, and the scrotum being previously shaved, the patient stands upright before the surgeon, who, if the varicocele is on the left side, grasps the right side of the scrotum with his left hand, whilst with his right he endeavors to discover the situation of the vas deferens; this is not difficult; its normal situation is at the posterior part of the cord, its form that of a cylindrical stem, equal through its whole extent, its volume that of a large crow-quill, its consistence is hard, though elastic, and may be compared to that of a nerve. But the best means of assuring yourself that you hold the vas deferens, is to press it between your fingers, when the patient should feel a peculiar painful sensation, referred both to the testicle and the groin, and which can scarcely deceive either the patient or the operator. Having discovered the vas deferens, the operator draws it towards the septum scroti with the thumb and forefinger, and endeavors to separate the veins from it, and to collect them towards the external part of the scrotum. This sort of sub-cutaneous dissection forms the only difficult part of the operation, and requires patience and attention; the separation of the vessels must be made with the greatest care, in order that no vein should remain with the vas deferens and spermatic artery. The veins being thus separated, an assistant places the first forceps on the upper part of the scrotum, transversely, and as high as possible, but far enough from the root of the penis to prevent the formation of an eschar on it; it will be found convenient to raise the penis against the abdomen. The branches of the forceps should be carried as far as possible towards the septum, excluding the vas deferens, and at the external part of the scrotum a pedicle of skin about two lines in width, and containing capillary vessels only, should be left uncompressed. As soon as the first pair of forceps is properly placed, it should be screwed tight. The second pair should then be placed, in like manner, as low down as possible, without comprising the testicle, and should be tightened in the same way. An improvement in the construction of the forceps is the introduction of a supplementary blade, which may be depressed daily, by means of a screw, so as gradually to increase the pressure without augmenting the pain. It is necessary to be careful that this increased pressure commences towards the septum, otherwise the vas deferens might be included between the blades. In general, severe pain is felt in the scrotum and groin, immediately after the operation; but this ceases in a few hours, and no further suffering is produced. A compress dipped in cold water should be applied to the scrotum, which should be slightly elevated. The forceps may be removed, from the fifth to the seventh day. The bridle of skin on the outside of the scrotum facilitates much the cicatrization of the wound, the edges of which would otherwise be widely separated by the erections of the penis, and by the weight of the testicle. —*Journal des Connaiss. Med.-Chir.*

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BOSTON, OCTOBER 30, 1839.

NEW REMEDIES.[*]

It occurred to us, while the articles entitled *New Remedies* were in the course of publication in the American Medical Library, that it was possible the editor contemplated a distinct work, in which should be embodied the whole series. We confess ourselves much gratified in receiving a large, plainly-printed volume, of a most respectable exterior appearance, from Philadelphia, which cannot be otherwise than popular with the medical profession, if suitable exertion is made to circulate it. *New Remedies: the method of preparing and administering them; their effects on the healthy and diseased economy, &c. &c.*, is the title, and our friends should be particular in sending orders to the booksellers. Medicines are continually multiplying, but there is so much empiricism in the world, and such an eagerness to grasp at every new thing that happens to have imputed to it a medicinal virtue, that the ignorant, under the burden of their infirmities, seize with avidity whatever vulgar rumor says is wonderful in its effects upon disease. With the strongest reliance on the representations of the most incompetent persons, men of good powers of discrimination sometimes surrender themselves entirely to the guidance of contemptible speculators in health—giving their bodies to the unrestrained management of those with whom they would not entrust a purse. Some of the most potent remedies, which are necessarily prescribed with extreme care by responsible, cautious physicians, are no sooner on sale in the shops, than every one dabbles in them according to his own crude notions of what is proper or judicious. Creosote, iodine, croton oil, morphine, &c. &c., are just as readily procured by all sorts of people, without inquiry into the object of the purchaser, or the use which is to be made of these active preparations, as a dose of Glauber salts or a box of simple cerate.

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[*] New Remedies: the method of preparing and administering them; their effects on the healthy and diseased economy, &c. By Robley Dunglison, M.D., &c. &c. Philadelphia: Lea & Blanchard, 1839. 8vo., p. 508.

Practitioners, in this age of multiplication, can scarcely keep pace with all the improvements and discoveries which are intended to provide them with new powers for contending with the ills and physical afflictions of humanity. It is not possible for all to be equally conversant with every new discovery in medicine—for they are not all circumstanced favorably for perusing every medical journal in this or any other country. A book, therefore, which puts them at once in possession of the whole mass of matter, of the character we are now considering, is positively greatly to be prized. Instead of travelling through a hecatomb of pamphlets, or decyphering a German or French treatise, for example, languages with which they may have but an imperfect acquaintance, they will find in this volume a concentration of all that is worth knowing in a particular department. The value of this book, therefore, is hardly to be estimated; to be without it, would be very much like obstinacy, and amount to the same thing as saying, like the Austrians in regard to their government—nothing can be improved, for we already live in a state of perfection. Dr. Dunglison, the author, has done an essential service to all classes of practitioners, in the compilation of this, his latest production. It is truly useful, because it plainly shows how the new medicine is prepared, how and under what circumstances it may be given, and, lastly, the effects it produces on the system; and the directions are sufficiently minute, while the general observations are copious without confusion.

Facts are what concern the physician: it is of no consequence to him what theories are the most popular, though, to the great injury of the character of the profession, too much deference is paid to the philosophisings of those who know very little about the readiest mode of restoring a patient. The publication to which these remarks refer, is a safe and useful guide in the administration of the new medicines, sanctioned by the highest authority. Since the cultivation of the science of botany is continually developing important medicinal agents, and chemistry puts us in possession of new and numerous preparations which were unknown to the physicians of the last century, these pilot books become invaluable.

Now it is no part of our intention to palm off Dr. Dunglison's book of New Remedies as an unmatched, unsurpassed production—it is not so; but intrinsically just what it purports to be, viz., an exact, scientific compilation from the very best available sources of information; it is creditable to the industry and wise discrimination of the author, and quite necessary to the libraries of those who feel the necessity of keeping pace with the improvements and discoveries in the broad and but imperfectly explored domain of medicine.

Revision of the Pharmacopœia.—A committee will meet in the city of Washington, on the first Wednesday of January, 1840, for revising the United States' Pharmacopœia, of which Lewis Condict, M.D., of New Jersey, is President. Massachusetts has no representative—and unless the Council of the Medical Society is called together at the special requisition of the President, the profession of this State will have neither part nor lot in the matter. New Hampshire sends three delegates, and in case of failure on the part of the regularly-appointed men, three substitutes were appointed to take their places.

Diseases of Infants.—Dr. Stewart's Translation of Billard, a splendid performance, which has been looked for impatiently, finally made its appearance in Boston, last week. Medical books seem to be better printed than formerly. This is an excellent specimen of typography, from the press of Mr. Adlard, New York. A dedication is made to Dr. John W. Francis. We have commenced reading, and hope, therefore, to give some account of it before long.

Fractured Bones.—Dr. Heard, of New York, reports cases of un-united fractures, treated on the plan of Dr. J. K. Rodgers, of that city—which is this—viz., remove the extremities of the fractured bone, and connect the ends of the two shafts by silver wire—holes being first drilled in each. They are brought together by twisting the wires—the ends of which are permitted to project from the wound.

Medical Miscellany.—Dr. Heintzelman has been chosen Coroner of Philadelphia: in this section of the country it seems to be of no consequence whether the coroner is well qualified for the office or not.—The Charleston, S. C. Board of Health announces the complete restoration of the public health in that city.—The sickness at Natchez is abating.—A catalogue of the Berkshire Medical Institution exhibits a class of 63 students, which shows great prosperity.—Dr. McClintock's office, Philadelphia, is recommended to students who may visit the medical schools of that city, as possessing superior advantages.—An election is to be made in the course of this month, of a successor to Dr. Griffith, in the University of Virginia, who resigned in consequence of ill health.—Dr. Gibson, of Philadelphia, has been made a corresponding member of the British Provincial Medical and Surgical Association.—A distinguished physician of New York has a new work of interest just ready for the press.—No. 1 of the second volume of the American Phrenological Journal, which has been due a fortnight, has just arrived.—Dr. Paul B. Goddard, Demonstrator of Anatomy in the University of Pennsylvania, has published a work, containing 12 plates, on the arteries—so say our exchange journals—not a copy of which is supposed to be in Boston.—Dr. F. C. Crane relates, in the London Lancet, several cases of cancer which have been cured or relieved by the use of iodide of arsenic. The dose, in one case, was an eighth of a grain, which was reduced to a twelfth, gradually increased to a third of a grain, and continued eight months, but its frequency is not mentioned.—Mr. Savage, a surgeon, in the same periodical publishes some important cautions respecting the use of the new ear medicine, by means of the air-press. He concludes by stating that mucous engorgement is the only ailment remediable by this instrument.—At the late meeting of the British Association for the Advancement of Science, held in Birmingham, a case of rupture of the duodenum—one of ileus, occasioned by a membranous band—one of intermittent coma—one of open foramen ovale, without cyanosis—and two or three others of minor import, were detailed. Several valuable papers on medical subjects were also read.

To the Reader.—The attention of the reader is respectfully directed to an interesting communication on the first page of this day's Journal, from Dr. Bradley, of the Missionary service, who resides at Bangkok, the capital of the kingdom of Siam.—We also desire to remind the reader that the lithographic illustrations of club-foot, which accompanied Dr. Brown's very important paper, last week, should be bound in the volume like a map, and not cut. The same article is to appear in a pamphlet, and to be extensively circulated over New England.—Dr. Short's letter, from Louisville, Ky., and other papers, will appear next week.

Married,—In Champlain, N. Y., George Spalding Gale, M.D., of Franklin, Vt., to Miss Eliza Nichols, of the former place.

Died,—In Boston, Gamaliel Bradford, M.D., Superintendent of the Mass. General Hospital.—At Boscawen, N. H., Dr. Elijah Blaisdell, 34.

Whole number of deaths in Boston for the week ending Oct. 26, 29. Males, 10—females, 19.

Of consumption, 5—disease in the head, 1—pleurisy fever, 1—intemperance, 2—decline, 1—inflammation of the bowels, 2—hooping cough, 2—gastritis, 1—dropsy on the brain, 2—inflammation of the lungs, 1—epilepsy, 1—scarlet fever, 2—hæmorrhage, 1—lung fever, 1—burn, 1—old age, 2—typhous fever, 1—gravel, 1—stillborn, 3.

MEDICAL LECTURES IN BOSTON.

The Medical Lectures in Harvard University will begin in the Medical College, Mason street, Boston, the first Wednesday in November next, at 9 o'clock, A. M., and continue sixteen weeks.

Anatomy, and Operations of Surgery, by	John C. Warren, M.D.
Chemistry, by	John W. Webster, M.D.
Midwifery and Medical Jurisprudence, by	Walter Channing, M.D.
Materia Medica and Clinical Medicine, by	Jacob Bigelow, M.D.
Principles of Surgery and Clinical Surgery, by	George Hayward, M.D.
Theory and Practice of Physic, by	John Ware, M.D.

At a meeting of the Faculty, it was

Voted, "That no two courses of Lectures shall be admitted to qualify students for gratuitous admission to Lectures in this School which have not been attended in separate years, or at least six months from each other.

WALTER CHANNING, Dean of the Faculty of Medicine.

Boston, July 10, 1839. Jy 17—tN

WASHINGTON UNIVERSITY OF BALTIMORE.

Medical Department.—Session, 1839—1840.

The regular Lectures in this institution will commence on the last Monday of October, and continue to the 1st of March. The Faculty consists of the following professors, in the order of their appointment.

J. H. Miller, M.D., Professor of Anatomy and Physiology.
Sam'l K. Jennings, M.D., Professor of Materia Medica, Therapeutics, and Legal Medicine.
Wm. W. Handy, M.D., Professor of Obstetrics, and Diseases of Women and Children.
John C. S. Monkur, M.D., Professor of Institutes and Practice of Medicine.
Edward Foreman, M.D., Professor of Chemistry.
John R. W. Dunbar, M.D., Professor of Surgery and Surgical Anatomy.
W. R. Handy, Demonstrator of Anatomy.

The plan of this institution is a new one in this country. The college buildings are so constructed, as to present peculiar advantages to the student, which every intelligent medical man will at once perceive, as this plan unites a Medical College, Marine and City Hospital, Rooms and excellent Board for a large number of resident students, who have the charge of the patients under the direction of the professors. Clinical lectures are delivered during the session, on Medicine and Surgery, by the professors of the respective chairs. Northern students who contemplate emigrating to the middle and southern States, are invited to examine the plan and location of this institution.

Additional information in reference to the plan, terms, &c., and a circular, may be obtained by a letter addressed to

JOHN R. W. DUNBAR,
Dean of Medical Faculty.

S 18—tN

VACCINE VIRUS.

Physicians in any section of the United States can procure ten quills charged with Pure Vaccine Virus, by return mail, on addressing the Editor of the Boston Medical and Surgical Journal, enclosing one dollar, *post paid*, without which no letter will be taken from the post office. June 19

PRIVATE MEDICAL INSTRUCTION.

The subscribers are associated for the purpose of giving a complete course of medical instruction. Their pupils will have regular access to the medical and surgical practice of the Massachusetts General Hospital. They will be admitted, also, to the practice of the House of Correction, which constantly presents a large number of important cases, and where opportunities will be afforded for acquiring a practical knowledge of compounding and dispensing medicines. They will be furnished with opportunities for the study of Practical Anatomy, not inferior to any in the country. To the pupils, particularly to those in the last year of their professional studies, facilities will be afforded for acquiring a personal acquaintance with private medical and obstetric practice. Instruction by examinations or lectures will be given in the different branches of medical studies, during the interval between the public lectures of the University. Books, and a room with fire and lights, will be furnished to the students at the expense of the instructers.

GEORGE C. SHATTUCK,
WALTER CHANNING,
JOHN WARE,
GEORGE W. OTIS, Jr.
WINSLOW LEWIS, Jr.

Oct. 31—eptf

SCHOOL FOR MEDICAL INSTRUCTION.

The subscribers are associated for receiving pupils, and affording them every facility for obtaining a complete medical education. Their pupils will have access to the medical and surgical practice of the Massachusetts General Hospital, to the Massachusetts Eye and Ear Infirmary, and to surgical operations in private practice. Instruction will be given by examinations and lectures in the interval of the public lectures at the Medical College. Facilities will be afforded for the prosecution of practical anatomy. A room is provided with books, &c., for the use of the students.

JOHN C. WARREN,
JOHN B. S. JACKSON,
ROBERT W. HOOPER,
J. MASON WARREN.

Oct. 9—tf

THE CHASE INFIRMARY

FOR THE TREATMENT OF HERNIA, AT CONCORD, N. H.

The perfect retention of the bowel is here guaranteed in all cases of *reducible* hernia, and a *radical cure* may be expected, except in cases of long standing in aged people. The attendance of the patient is required no further than to afford opportunity, by means of a suitable instrument, to adjust the degree of pressure necessary to ensure the certain retention of the bowel, provided the patient immediately report himself should a re-appearance of the hernia, or too much inflammation, render a different adjustment of the instrument necessary. THO. CHADBOURNE, M.D., *Concord, N. H.*

References.—Amos Twitchell, M.D., Keene; Matthias Spaulding, M.D., Amherst; Oliver Perry, M.D., Exeter; C. A. Cheever, M.D., Portsmouth; William Burns, M.D., Littleton. A14—

TREMONT-STREET MEDICAL SCHOOL.

The subscribers, at their private medical school in Tremont street, offer the following facilities to professional students.

1. A daily attendance at the wards of the Massachusetts General Hospital.
2. Attendance at the Massachusetts Eye and Ear Infirmary.
3. Opportunities of seeing interesting cases and surgical operations in private practice, in the dispensaries and elsewhere.
4. Occasional opportunities for obstetric practice.
5. Lectures on surgery and on diseases of the eyes, and practical demonstrations in anatomy from recent subjects.
6. Regular examinations, as far as desired, in all the branches, in the interval between the lectures of Harvard University.
7. A private dissecting room, in which during the last year an abundant supply of anatomical subjects has been gratuitously furnished.

Eighteen gentlemen have entered this school since its commencement in September last.

JACOB BIGELOW,
EDWARD REYNOLDS,
D. HUMPHREYS STORER,
OLIVER W. HOLMES.

Boston, May 15, 1839. 2am6m

MEDICATED VAPOR BATHS.

Physicians are informed that they can have administered to their patients the Whitlow Vapor Baths, medicated to meet a variety of indications.

The following are the kind usually given.—Anti-inflammatory, anti-spasmodic, anti-syphilitic, antacid, anti-hæmorrhagic. These baths have given evidence of their efficacy in pulmonary affections, and other diseases of the lungs, in prostration of the nervous system, in constitutional scrofula, in chronic diseases of liver, in ulcers and cutaneous eruptions on any part of the body, in neuralgia and all painful affections of the nerves. In every kind of rheumatism they have proved very beneficial. In erysipelas the vapor bath is attended with most excellent effect. One single bath will sometimes remove all the heat, swelling and itching.

Given under the superintendence of Dr. A. Gerrish, No. 14 Franklin Place, Boston.

Aug 21—tf

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR., at 184 Washington St., corner of Franklin St., to whom all communications must be addressed, post paid. It is also published in Monthly Parts, with a printed cover. There are two volumes each year. J. V. C. SMITH, M.D., Editor. Price $3,00 a year in advance, $3,50 after three months, or $4,00 if not paid within the year. Two copies to the same address, for $5,00 a year, in advance. Orders from a distance must be accompanied by payment in advance or satisfactory reference. Postage the same as for a newspaper.